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(FILE 'HOME' ENTERED AT 14:00:03 ON 04 SEP 2007)

FILE 'BIOSIS, CAPLUS, EMBASE, MEDLINE, JAPIO' ENTERED AT 14:00:22 ON 04
SEP 2007

L1 16474 S (BRAIN NATRIURETIC PEPTIDE)
L2 659 S L1 AND STROKE?
L3 467 DUPLICATE REMOVE L2 (192 DUPLICATES REMOVED)
L4 67 S L3 AND PD<2001
L5 12784 S (VENTRICULAR FUNCTION) AND STROKE
L6 258 S L5 AND REVIEW
L7 1 S L6 AND (REDUCE? VENTRICULAR FUNCTION)
L8 133 S L6 AND PD<2001
L9 112 DUPLICATE REMOVE L8 (21 DUPLICATES REMOVED)

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ANSWER 54 OF 67 MEDLINE on STN

AN 1998399693 MEDLINE

DN PubMed ID: 9730565

TI Plasma concentration of brain natriuretic peptide as an indicator of cardiac ventricular function in patients on hemodialysis.

AU Nitta K; Kawashima A; Yumura W; Naruse M; Oba T; Kabaya T; Nihei H

CS Department of Medicine, Kidney Center, Tokyo Women's Medical College, Shinjuku-ku, Tokyo, Japan.

SO American journal of nephrology, (1998) Vol. 18, No. 5, pp. 411-5.

Journal code: 8109361. ISSN: 0250-8095.

CY Switzerland

DT Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)

LA English

FS Priority Journals

EM 199810

ED Entered STN: 6 Jan 1999

Last Updated on STN: 6 Jan 1999

Entered Medline: 26 Oct 1998

AB The plasma concentration of human brain natriuretic peptide (BNP) was measured by immunoradiometric assay in patients on maintenance hemodialysis (HD) to assess the possible relationship between the plasma levels of this peptide and cardiac ventricular function, as judged by M-mode echocardiography. The plasma BNP levels in the pre-HD state were significantly higher (688.5 +/- 154.5 pg/ml) than those of healthy subjects (<40 pg/ml). In addition, the plasma BNP levels were slightly decreased during HD (post-HD, 617.3 +/- 157.1 pg/ml). There was no correlation between the plasma levels of BNP and body weight changes during HD. The mean plasma BNP level was significantly higher in the group of patients with a low left ventricular ejection fraction (EF < 60%) than in the group with a normal EF. In the patients as a whole, there was an inverse correlation between plasma BNP levels and EF. Moreover, a positive correlation was found between plasma BNP levels and left ventricular mass index ($r = 0.57$, $p < 0.05$). These results suggest that plasma BNP levels increase in response to chronic stimulation in accordance with increased cardiac load, and that they may be a possible indicator of reduced ventricular function in HD patients.

CT Check Tags: Female; Male

Atrial Natriuretic Factor: BL, blood

Echocardiography

Humans

Middle Aged

*Natriuretic Peptide, Brain: BL, blood

*Renal Dialysis

Stroke Volume

*Ventricular Function, Left

RN 114471-18-0 (Natriuretic Peptide, Brain); 85637-73-6 (Atrial Natriuretic Factor)

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AN 2000037885 EMBASE

TI Clinical implication of antiembolic trials in atrial fibrillation and role of transesophageal echocardiography in atrial fibrillation.

AU Jagasia D.H.; Williams B.; Ezekowitz M.D.

CS Dr. M.D. Ezekowitz, Yale Clinical Trials Office, 47 College Pl., New Haven, CT 06511, United States. Ezekowitz@yale.edu

SO Current Opinion in Cardiology, (2000). Vol. 15, No. 1, pp. 58-63.

Refs: 34

ISSN: 0268-4705 CODEN: COPCE3

CY United States

DT Journal; General Review

FS 018 Cardiovascular Diseases and Cardiovascular Surgery

037 Drug Literature Index

038 Adverse Reactions Titles

LA English

SL English

ED Entered STN: 3 Feb 2000

Last Updated on STN: 3 Feb 2000

AB Risk for stroke in patients with atrial fibrillation (AF) is highly heterogeneous. Increasing age, history of diabetes, hypertension, previous transient ischemic attack or stroke, and poor ventricular function are independent risk factors for stroke in patients with AF. Accordingly, some groups of patients with AF have low risk and some have high risk. In general, patients at high risk benefit most from anticoagulation therapy with warfarin. In general, if a patient is younger than 65 years of age and has none of the defined risk factors, the stroke rate without prophylaxis (aspirin or warfarin) is low. In patients 65 to 75 years of age with no risk factors, the risk for stroke is low with either aspirin or warfarin therapy; the choice is left to the caretaking physician. All patients older than 75 years and all patients of any age who have risk factors obtain striking benefit from the use of anticoagulation with warfarin. This benefit far outweighs any risk for major hemorrhage. Curr Opin Cardiol 2000, 15:58-63 (C) 2000 Lippincott Williams and Wilkins, Inc.

CT Medical Descriptors:

*transesophageal echocardiography

*anticoagulant therapy

*heart atrium fibrillation: DT, drug therapy

diabetes mellitus

hypertension

transient ischemic attack

risk factor

stroke: PC, prevention

risk

age

cardioversion

thromboembolism: SI, side effect

prophylaxis

bleeding: SI, side effect

human

male

major clinical study

controlled study

aged

adult

clinical trial

randomized controlled trial

double blind procedure

multicenter study

review

priority journal

ANSWER 7 OF 112 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

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*anticoagulant therapy
*heart atrium fibrillation: DT, drug therapy
diabetes mellitus
hypertension
transient ischemic attack
risk factor
stroke: PC, prevention
risk
age
cardioversion
thromboembolism: SI, side effect
prophylaxis
bleeding: SI, side effect
human
male
major clinical study
controlled study
aged
adult
clinical trial
randomized controlled trial
double blind procedure
multicenter study
review
priority journal

Drug Descriptors:

warfarin: AE, adverse drug reaction

warfarin: CT, clinical trial

warfarin: CM, drug comparison

warfarin: DO, drug dose

warfarin: DT, drug therapy

acetylsalicylic acid: AE, adverse drug reaction

acetylsalicylic acid: CT, clinical trial

acetylsalicylic acid: CM, drug comparison

acetylsalicylic acid: DO, drug dose

acetylsalicylic acid: DT, drug therapy

RN (warfarin) 129-06-6, 2610-86-8, 3324-63-8, 5543-58-8, 81-81-2;
(acetylsalicylic acid) 493-53-8, 50-78-2, 53663-74-4, 53664-49-6,
63781-77-1

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ANSWER 65 OF 67 MEDLINE on STN

AN 94030813 MEDLINE
DN PubMed ID: 8217036
TI Chronic ethanol treatment increases the circulating plasma levels of B-type natriuretic peptide (BNP-45) in the rat.
AU Wigle D A; Pang S C; Watson J D; Sarda I R; Radakovic N N; Flynn T G
CS Department of Anatomy, Queen's University, Kingston, Canada.
SO American journal of hypertension : journal of the American Society of Hypertension, (1993 Aug) Vol. 6, No. 8, pp. 719-22.
Journal code: 8803676. ISSN: 0895-7061.
CY United States
DT Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)
LA English
FS Priority Journals
EM 199312
ED Entered STN: 17 Jan 1994
Last Updated on STN: 6 Feb 1998
Entered Medline: 3 Dec 1993
AB Chronic ethanol ingestion is associated with a number of cardiovascular disorders, including stroke, heart failure, and hypertension. Given that the regulation of A-type natriuretic peptide (ANP) and B-type natriuretic peptide (BNP) is known to be altered in both congestive heart failure and essential hypertension, we have investigated the regulation of BNP under the influence of ethanol ingestion. Sprague-Dawley rats were given ethanol in drinking fluid for a 6-week period, while a weight-matched liquid-restricted group received an equivalent volume of ethanol-free solution. Plasma BNP levels were increased in ethanol-treated animals relative to both liquid-restricted and normal control groups. No changes in cardiac BNP gene expression were observed, but an increased trend in atrial tissue BNP levels was evident. No changes in either the mRNA, tissue, or plasma levels of ANP were evident. These results suggest a differential regulation of natriuretic peptides under the influence of ethanol, and implicate chronic ethanol ingestion as a further clinical condition under which the plasma levels of a natriuretic peptide may be elevated.
CT Check Tags: Male
Animals
*Antihypertensive Agents: BL, blood
*Ethanol: PD, pharmacology
Gene Expression: DE, drug effects
Nerve Tissue Proteins: BI, biosynthesis
*Nerve Tissue Proteins: BL, blood
Nerve Tissue Proteins: GE, genetics
RNA, Messenger: BI, biosynthesis
Rats
Rats, Sprague-Dawley
Stimulation, Chemical
RN 125387-66-8 (brain natriuretic peptide-45); 64-17-5 (Ethanol)
CN 0 (Antihypertensive Agents); 0 (Nerve Tissue Proteins); 0 (RNA, Messenger)

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